

Kansas

Real Estate Appraisal Board

Experience Application

FOR BOARD USE ONLY	
Application/License #: _____	Exam Pass Date: _____
Experience Fee: \$ _____	<input type="checkbox"/> Cash/Check <input type="checkbox"/> Charge
Deposit Date: _____	Processed By: _____

KANSAS REAL ESTATE APPRAISAL BOARD

EXPERIENCE APPLICATION

☐ STATE LICENSE

☐ RESIDENTIAL CLASSIFICATION

☐ GENERAL CLASSIFICATION

Submit this application along with the \$250 experience fee, Ad Valorem tax information (if applicable), summary of appraisal experience and log sheets to: Kansas Real Estate Appraisal Board, 1100 S.W. Wanamaker Rd., Ste. 104, Topeka, KS 66604.

*** DENOTES A "REQUIRED" FIELD. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

1.* Full Name: _____
Last
First
Middle

2.* Social Security Number: _____ - _____ - _____
 Your social security number is required pursuant to 42 U.S.C. 666, K.S.A. 74-148 and K.S.A. 74-139, and may be used for child support enforcement purposes or provided to the Kansas Director of Taxation upon request. The last six digits will be provided for the registry maintained by the Appraisal Subcommittee of the Federal Financial Institutions Examination Council pursuant to federal law.

3.* Residence Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

4.* Business Name: _____

Business Address: _____
If no address is shown, the applicant's residence address will be used as their business address.

City: _____ State: _____ Zip Code: _____ County: _____

5.* Business Phone: (_____) _____ Residence Phone: (_____) _____

Fax No.: (_____) _____ E-Mail Address: _____

6.* Date of Birth: ____/____/____ 7.* Sex: ☐ Male ☐ Female

8.* Have you ever been known by any other name or alias (including maiden name): ☐ Yes ☐ No

If "yes", list all names or aliases by which you are or have been known: _____

9. Do you now, or have you in the past, held an appraiser's license/certificate in the State of Kansas?

☐ Yes ☐ No If "yes", provide the license/certificate number: _____

10. Do you now or have you been licensed or certified as an appraiser in any state other than Kansas within the last five years?

☐ Yes ☐ No If "yes", attach a letter of good standing from the issuing state. List all states: _____

11. Date examination was passed: _____ (Keep in mind that your test is valid for no more than two (2) years.)

**** IF ANSWERED "YES", APPLICANT MUST ATTACH A DETAILED EXPLANATION AND/OR SUPPORTING DOCUMENTATION.**

12.** Have you ever practiced or held yourself out as being licensed or certified to practice real estate appraisal in any state when, in fact, you were not licensed or certified to do so?

☐ Yes ☐ No

13.** Have you ever had an application for a professional or occupational license or certification denied in this or any other state?

☐ Yes ☐ No

14.** Has there been a revocation, suspension or any other disciplinary action taken by the state of Kansas or any other jurisdiction in relation to any appraisal license or certification held by you?

☐ Yes ☐ No (If "yes", attach a copy of the complaint that sets forth the allegations and any settlement agreement or order that sets forth the outcome.)

15.** Have you ever been convicted of a criminal offense or is there any criminal charge now pending against you (other than minor traffic violations)?

☐ Yes ☐ No (If "yes", provide the date, offense or pending charge, court and case number, and attach a copy of the charges, any order of conviction, sentencing and any release from probation or parole.)_____

16.** Has a final civil judgment been entered against you on the grounds of financial misrepresentation or deceit in the making of any appraisal of real property? (See K.S.A. 58-4118(a)(12))

☐ Yes ☐ No (If "yes", provide the date, court and case number and attach a copy of the settlement or judgment.)_____

17.** Do you currently have an application for a professional or occupational license in Kansas or any other state pending approval or denial?

☐ Yes ☐ No (If "yes", provide the name of the state and license type.)_____

I hereby attest that the foregoing statements are true and correct to the best of my knowledge.

Date Signed

Signature of Applicant

<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard																
Expiration:	Month	<input type="text"/>	<input type="text"/>	Year:	<input type="text"/>	<input type="text"/>	<input type="text"/>	Amount of Charge: \$ _____									
Print Cardholder's Name _____								Cardholder's Signature _____									

AD VALOREM TAX APPRAISAL EXPERIENCE
(25%)

Experience must be reported on the experience log. Complete this supplemental sheet and attach it to the log sheet. *Data collection experience must be less than 10%.

Components of the mass appraisal process that may be given credit are: Highest and Best Use Analysis, Model Specification (developing the model) and Model Calibration (developing adjustments to the model). Other components of the mass appraisal process, by themselves, are not eligible for experience credit.

Name: _____ Calendar Year: _____

I have worked in the various areas as follows:

PHASE	RESPONSIBILITY	TOTAL HOURS	TOTAL GENERAL
220	Index/Depreciation Study for Cost		
310/315	Neighborhood Analysis and Value		
200/325 333/340	Data Collection Sales Verification Grade and CDU *May not exceed 10%		
380	Market Modeling		
450	Income Modeling		

AD VALOREM TAX APPRAISAL EXPERIENCE

(25% HOUR MAXIMUM)

- A. As an appraising official, deputy or employee thereof, I have appraised, in accordance with the Uniform Standards of Professional appraisal Practice Standards Rule 1, 2 and 6 and K.S.A. 79-504, 79-505 and 79-506 for ad valorem tax purposes approximately residential properties and approximately _____ nonresidential properties, using cost, income and market sales appraisal techniques. These valuations were conducted between _____ and _____.
Year Year
- B. As an appraising official, deputy or employee thereof, I have reviewed approximately residential and approximately _____ nonresidential appraisals, prepared for ad valorem tax purposes. The appraisals reviewed employed the cost, income and market sales appraisal techniques. These appraisal reviews were conducted between _____ and _____.
Year Year

In accordance with K.S.A. 58-4123(c), all records required to be maintained under the provisions of the Kansas State Certified and Licensed Real Property Appraisers Act shall be made available by the appraiser for inspection and copying by the Board on reasonable notice to the appraiser. In addition, **in accordance with K.S.A. 58-4123, each applicant or appraiser shall grant full access to all county or state appraisal records, reports and supporting data that pertain to the application process or to a complaint investigation. Refusal of such inspection shall be grounds for denial, suspension or revocation of the license or certificate.**

Records and files pertaining to the above requested appraisal experience are on file (list county, name, address and telephone number).

County	Address	Phase
--------	---------	-------

I hereby certify that the information provided on this form is true and correct to the best of my knowledge.

Date	Applicants Signature
------	----------------------

State of: _____)
County of: _____) ss: _____ Notary Seal

Subscribed and sworn before me this _____ day of _____

Date	Signature of Notary Public
------	----------------------------

My appointment expires: _____.

I hereby certify that the information under the Ad Valorem Tax Appraisal Experience Form is true and correct and accurately represents the work of this applicant. I also certify that the applicant's place of employment can verify the appraiser's substantial contribution and individual participation in each mass appraisal component that is listed above.

Date	County Appraiser or Supervisor
------	--------------------------------

SUMMARY OF APPRAISAL EXPERIENCE

Applicant's Name (Print)

Date Submitted

Enter the Total Hours from the Appraisal Experience Log.

	<u>Hours</u>		<u>Hours</u>
Calendar Year_____:	_____	Calendar Year_____:	_____
Calendar Year_____:	_____	Calendar Year_____:	_____
Calendar Year_____:	_____		
Total Hours: _____			

GENERAL CLASSIFICATION

If you are applying for the General Classification, enter the General Hours from the Appraisal Experience Log. You must have at least 1,500 hours in the General category.

	<u>Hours</u>		<u>Hours</u>
Calendar Year_____:	_____	Calendar Year_____:	_____
Calendar Year_____:	_____	Calendar Year_____:	_____
Calendar Year_____:	_____		
Total Hours: _____			

I hereby certify that the information provided in the attached Appraisal Experience Log is true and correct.

Date

Applicant's Signature

State of _____)
_____)
County of _____)

ss.

Notary Seal

Subscribed and sworn to before me this ____ day of _____, _____

Date

Notary Public

My appointment expires:_____.

PROVISIONAL TRAINEE’S APPRAISAL EXPERIENCE LOG**

Name: _____ Calendar Year: _____ Page _____ of _____

DATE	TYPE OF PROPERTY	WORK PERFORMED	TYPE OF Form (URAR, 2055, ETC.)	Type of Appraisal	PROPERTY ADDRESS (STREET, CITY & STATE)	CLIENT NAME AND ADDRESS	DID YOU SIGN THE REPORT?	TOTAL HOURS	DID SUPERVISOR INSPECT?	SIGNATURE AND CERT/LICENSE NUMBER OF SUPERVISOR

Total This Page: _____

Cumulative This Calendar Year: _____

It is recommended that, on completion of an appraisal, the trainee log the information and have their supervisor sign-off where indicated. **DO NOT wait weeks or months before making your log entries, as the Board will not act as an arbitrator between the trainee and the supervisor if there is a dispute with regard to the number of hours which qualify as experience.

APPRAISAL EXPERIENCE LOG
(NOT FOR USE BY PROVISIONAL LICENSEES)

Applicant's Name: _____ Calendar Year: _____ Page _____ of _____

DATE	TYPE OF REPORT	TYPE OF PROPERTY	Type of Appraisal	PROPERTY ADDRESS (STREET, CITY & STATE)	DID YOU SIGN THE REPORT?	TOTAL HOURS	GENERAL HOURS	WAS APPRAISAL SUPERVISED?	DID SUPERVISOR INSPECT PROPERTY?	SUPERVISOR NAME & CERTIFICATION NUMBER (IF APPLICABLE)

Total This Page: _____

Cumulative This Calendar Year: _____

This form is for the reporting of fee & staff appraisals. Alternate appraisal experience (Review, Highest & Best Use, etc.) is reported on the form found on page 8.

ALTERNATE EXPERIENCE LOG

ACCEPTABLE APPRAISAL EXPERIENCE MAY INCLUDE AN AGGREGATE MAXIMUM OF 25% OF THE TOTAL NUMBER OF EXPERIENCE HOURS IN THE FOLLOWING APPRAISAL CATEGORIES:

REVIEW APPRAISAL; REAL ESTATE CONSULTING; HIGHEST AND BEST USE ANALYSIS; FEASIBILITY ANALYSIS STUDY; DRIVE-BY APPRAISALS; RESTRICTED APPRAISAL REPORTS; LIMITED APPRAISAL REPORTS

		REVIEW APPRAISAL, HIGHEST AND BEST USE ANALYSIS, FEASIBILITY ANALYSIS STUDY, DRIVE-BY; RESTRICTED & LIMITED REPORTS		REAL ESTATE CONSULTING	
DATE	TYPE OF EXPERIENCE	PROPERTY ADDRESS (STREET, CITY & STATE)	TOTAL HOURS	DESCRIPTION OF ACTIVITY	TOTAL HOURS

EXPERIENCE TYPE	TOTAL HOURS
REVIEW APP; HIGHEST & BEST USE; FEASIBILITY ANALYSIS, DRIVE-BY, RESTRICTED & LIMITED APP REPORTS	
REAL ESTATE CONSULTING:	
TOTAL ALTERNATE EXPERIENCE:	

LIMITS BY LICENSE/CERTIFICATION TYPE	
STATE LICENSE	500 HOURS
CERTIFIED RESIDENTIAL	625 HOURS
CERTIFIED GENERAL	750 HOURS